

Storm Drain Marking Program 2145 Suttle Avenue Charlotte, NC 28208-5237

SIGNATORY INSTRUCTIONS

Mecklenburg County, the City Of Charlotte and the individual participant or group recognize the need and desirability of litter-free and healthier creeks, rivers, and lakes. The Storm Drain Marking (SDM) program has been established for individuals, community and civic organizations as well as private businesses and industry to contribute toward this effort.

As indicated by their signatures on this agreement, the individual participant, or the individual participants of the group are aware of the nature of the work which is to be performed, that there may be hazards associated with their participation as disclosed in the Safety Procedures, and have agreed to follow Charlotte-Mecklenburg Storm Water Servies' (CMSWS) rules, policies, safety guidelines and instructions. The individual participants agree to not hold Mecklenburg County or the City of Charlotte responsible for any injuries they, their employees or their agents may suffer or damages that they, their employees, or their agents may cause or suffer as a result of participation in the program.

- 1. Signatures of individual group members participating in one or more storm drain marking projects are required in the spaces provided below. No person may sign for another person.
- 2. A parent/guardian is required to sign for a volunteer under 18 years of age. A Storm Drain Marking Youth Participation Release Form which must be signed by a parent/guardian to authorize a youth's participation in the program is on Page 4. (If additional lines are needed, please makecopies.)

ADOPTING GROUP SIGNATURES

The following persons will participate in one or more storm drain marking projects. By their signatures they (i) are indicating that they are aware that there may be hazards associated with such participation as disclosed in the Safety Procedures and that by participating they agree to assume the risks of such hazards, (ii) agree to abide by Mecklenburg County and the City of Charlotte's rules, policies, safety guidelines and instructions, and (iii) agree to not hold the above mentioned parties responsible for any injuries they may suffer or damages that they may cause or suffer as a result of participation in the **Storm Drain Marking Program**. They also release to Mecklenburg County and the City of Charlotte the right to edit and use any recordings or photographs for the purpose of advertising, trade, or social media (Facebook, YouTube, Twitter, etc.). The undersigned also agree to keep complete and accurate records of all marked storm drains using the Marked Drain Log. Completed Marked Drain Logs should be returned to Mecklenburg County Water Quality program within 72 hours of the completion of stream cleanup activities, via mail, email or online at:stormwater.charmeck.org

Primary Group Contact Person	Date	Signature	Date
Signature	Date	Signature	Date
Signature	Date	Signature	Date
Signature	Date	Signature	Date
Signature	Date	Signature	Date
Signature	Date	Signature	Date
Signature	Date	Signature	Date



Storm Drain Marking Program 2145 Suttle Avenue Charlotte, NC 28208-5237

Storm Drain Marking Youth Participation Form

As the parent/guardian of the minor child named below between the ages of 10 through 17, I hereby give permission for him/her to participate in one or more **Storm Drain Marking** projects. By my signature I release the City of Charlotte and Mecklenburg County from any liability or responsibility for any injuries or damages he/she may cause or suffer as a result of participation in the **Storm Drain Marking Program**. They also release to Mecklenburg County and the City of Charlotte the right to edit and use any recordings or photographs for the purpose of advertising, trade, or social media (Facebook, YouTube, Twitter, etc.).

Parent or Guardian Signature	Date	Printed Name of Minor Child	
Parent or Guardian Signature	Date	Printed Name of Minor Child	
Parent or Guardian Signature	Date	Printed Name of Minor Child	
Parent or Guardian Signature	Date	Printed Name of Minor Child	
Parent or Guardian Signature	Date	Printed Name of Minor Child	
Parent or Guardian Signature	Date	Printed Name of Minor Child	
Parent or Guardian Signature	Date	Printed Name of Minor Child	
Parent or Guardian Signature	Date	Printed Name of Minor Child	
Parent or Guardian Signature	Date	Printed Name of Minor Child	
Parent or Guardian Signature	Date	Printed Name of Minor Child	
Parent or Guardian Signature	Date	Printed Name of Minor Child	
Parent or Guardian Signature	Date	Printed Name of Minor Child	
Parent or Guardian Signature	Date	Printed Name of Minor Child	
Parent or Guardian Signature	Date	Printed Name of Minor Child	
Parent or Guardian Signature	Date	Printed Name of Minor Child	